PI - Provider On-Site Reviews

Purpose:

The following procedure describes the steps required to prepare for and complete a provider on-site review.

Identification of Roles:

IME Program Integrity (PI)— conduct on-site provider reviews. State PI Staff – Approve on-site reviews

Performance Standards:

Conduct On-site field reviews upon request

Path of Business Procedure:

A Senior Reviewer accompanies a Reviewer. Unless otherwise stated, the Reviewer is responsible for ensuring all tasks are completed.

Step 1. On-site Review Notification and Preparation

The following steps are completed by the PI Reviewer.

- a. Create the medical record request list using spreadsheet format including the Recipient's name, State Identification Number (SID), Transaction Control Number (TCN), Date of Service (DOS), and Date of Birth (DOB) or receive the medical record request spreadsheet from the Database Management Administrator.
- b. Select potential dates for the on-site review, allowing for at least a 14-calendar day notice to the provider, except in the case of a "no-knock" review. A "no-knock" review does not give a provider notice of the impending review.
- c. The Senior Reviewer will enter information into the provider case file in OnBase Workflow and in the PI Database.
- d. The Reviewer will update case information in the PI Database.
- e. If appropriate, contact the provider to set-up the review.
 - 1. Use the "Notification of On-site Review" template.

- 2. Call to confirm the review with the provider 2-3 days prior to the review.
- f. In some cases, the Operations Manager, Senior Reviewer and Reviewer may determine that the provider should not receive prior notice as stated above. Alternative options include:
 - 1. Notifying the provider of the files to pull the day before the review.
 - a. Use the same letter template, but fax the letter and spreadsheet to the provider.
 - b. Depending on the provider and circumstances of the case, the reviewer may identify the recipient files to be reviewed and omit dates of service, TCN's, etc.
 - 2. In some circumstances it may be determined that no prior notice be given to the provider. This is often called a "door knock" or "no-knock" review, and does not allow providers to prepare records for the review. The following circumstances may indicate the need for a "no-knock" review.
 - a. Serious billing concerns are noted
 - b. Services being provided require special equipment
 - c. Provider location is questionable
 - d. Referral issue would require on-site verification

Step 2. Complete the On-site Review.

- a. Conduct entrance conference using the Entrance Conference guidelines. Refer to PI Form F-161.
- b. Match the medical records and claim forms with the worksheets utilized for non-hospital reviews.
- c. Review records noting the information on the claim face sheet or line items billed on the worksheet. Each review will be different based on the reason for the review.
 - 1. Note any educational items for the exit conference and findings letter.
 - 2. Record any missing documentation and communicate this information to the provider throughout the review.

- 3. Secure review room when leaving for any reason. Remove the claim face sheets or worksheets when leaving the facility or building and secure them in a locked briefcase.
- 4. Request copies of records with noted concerns for off site follow-up.
- Step 3. Conduct the exit conference utilizing the Exit Conference Guidelines. Refer to Form F-162.
- Step 4. Return all necessary records and review information to Iowa Medicaid Enterprise (IME) by using the locked briefcases.

Forms/Reports:

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RFP References

6.1.2.2.8

Interfaces:

Program Integrity Unit State PI Staff

Attachments:

None